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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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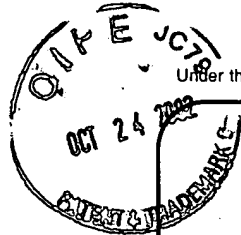
<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	<b>Applicati n Number</b>	09/917,378	
	<b>Filing Date</b>	July 28, 2001	
	<b>First Named Invent r</b>	Ding, Shi-You et al.	
	<b>Group Art Unit</b>	1652	
	<b>Examiner Name</b>	Rao, Manjunath N.	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	NREL 01-35

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Paul J. White
Signature	<i>Paul J. White</i>
Date	October 17, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <span>October 18, 2002</span>			
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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ ) 55

Complete if Known

Application Number 09/917,378  
Filing Date July 28, 2001  
First Named Inventor Ding, Shi-You et al.  
Examiner Name Rao, Manjunath N.  
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METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)																																																																																																																																																					
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 14-0460</p> <p>Deposit Account Name: National Renewable Energy Laboratory</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>					<p>3. ADDITIONAL FEES</p> <table border="1"><thead><tr><th>Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>205</td><td>65</td><td></td></tr><tr><td>127</td><td>50</td><td>227</td><td>25</td><td></td></tr><tr><td>139</td><td>130</td><td>139</td><td>130</td><td></td></tr><tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td></td></tr><tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td></td></tr><tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td></td></tr><tr><td>115</td><td>110</td><td>215</td><td>55</td><td>55</td></tr><tr><td>116</td><td>400</td><td>216</td><td>200</td><td></td></tr><tr><td>117</td><td>920</td><td>217</td><td>460</td><td></td></tr><tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td></td></tr><tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td></td></tr><tr><td>119</td><td>320</td><td>219</td><td>160</td><td></td></tr><tr><td>120</td><td>320</td><td>220</td><td>160</td><td></td></tr><tr><td>121</td><td>280</td><td>221</td><td>140</td><td></td></tr><tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td></td></tr><tr><td>140</td><td>110</td><td>240</td><td>55</td><td></td></tr><tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td></td></tr><tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td></td></tr><tr><td>143</td><td>460</td><td>243</td><td>230</td><td></td></tr><tr><td>144</td><td>620</td><td>244</td><td>310</td><td></td></tr><tr><td>122</td><td>130</td><td>122</td><td>130</td><td></td></tr><tr><td>123</td><td>50</td><td>123</td><td>50</td><td></td></tr><tr><td>126</td><td>180</td><td>126</td><td>180</td><td></td></tr><tr><td>581</td><td>40</td><td>581</td><td>40</td><td></td></tr><tr><td>146</td><td>740</td><td>246</td><td>370</td><td></td></tr><tr><td>149</td><td>740</td><td>249</td><td>370</td><td></td></tr><tr><td>179</td><td>740</td><td>279</td><td>370</td><td></td></tr><tr><td>169</td><td>900</td><td>169</td><td>900</td><td></td></tr></tbody></table>					Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	105	130	205	65		127	50	227	25		139	130	139	130		147	2,520	147	2,520		112	920*	112	920*		113	1,840*	113	1,840*		115	110	215	55	55	116	400	216	200		117	920	217	460		118	1,440	218	720		128	1,960	228	980		119	320	219	160		120	320	220	160		121	280	221	140		138	1,510	138	1,510		140	110	240	55		141	1,280	241	640		142	1,280	242	640		143	460	243	230		144	620	244	310		122	130	122	130		123	50	123	50		126	180	126	180		581	40	581	40		146	740	246	370		149	740	249	370		179	740	279	370		169	900	169	900	
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<p><b>FEE CALCULATION</b></p> <p>1. BASIC FILING FEE</p> <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr></tbody></table> <p>SUBTOTAL (1) (\$ ) 0</p>					Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee		106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee																																																																																																																			
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<p>2. EXTRA CLAIM FEES</p> <p>Total Claims: 20 ** = 0 X Fee from below = 0</p> <p>Independent Claims: 3 ** = 0 X Fee from below = 0</p> <p>Multiple Dependent: X Fee from below = 0</p> <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr></tbody></table> <p>SUBTOTAL (2) (\$ ) 0</p>					Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	84	202	42	Independent claims in excess of 3		104	280	204	140	Multiple dependent claim, if not paid		109	84	209	42	** Reissue independent claims over original patent		110	18	210	9	** Reissue claims in excess of 20 and over original patent																																																																																																																			
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<p>**or number previously paid, if greater; For Reissues, see above</p>					<p>Other fee (specify) _____</p> <p>*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ ) 55</p>																																																																																																																																																					

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Paul J. White	Registration No. Attorney/Agent	30,346	Telephone	(303) 275-3000
Signature				Date	October 18, 2000

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